FORM D

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
WILFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL					
OMB Number:	3235-0076				
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SEC US	SE ONLY
Prefix	Serial
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American Wiles and State Congany, Tax. Common Stack Offering Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA	· · 🗀 ·	nt and name has changed, and indicate change.)	_
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) American Wireless Gauge (Company, TWC.	Filing Under (Check box(es) that apply): Rule	F Company, TNC. Common ST 504 Rule 505 Rule 506 Section 4(6	ULOE
Address of Executive Offices (Number and Street, City, State, Zip Code) Address of Executive Offices (Number and Street, City, State, Zip Code) Address of Principal Business Operations (Number and Street, City, State, Zip Code) Address of Principal Business Operations (Number and Street, City, State, Zip Code) Brief Description of Business Manufacture Er of Equipment for Centrally monitoring Volume in Propane Tanks. Type of Business Organization Scorporation Imited partnership, already formed other (please specify): Imited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	Enter the information requested about the issuer	A. BASIC IDENTIFICATION DATA	
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Brief Description of Business MANU FACTURER OF Equipment for Centrally monitoring Volum 1 in Propane 7anks. Type of Business Organization Corporation Imited partnership, already formed business trust Imited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: All 19382			03026557
Type of Business Organization Society Corporation C	Address of Principal Business Operations	NEST CHESTER PA 19382	(610) 429-5300
Scorporation limited partnership, already formed other (please specify): Description Des	Brief Description of Business Manufactur Volum 2 IN	ER of Equipment for CE Propane TANKS.	ENTRALLY MONITORING
Actual or Estimated Date of Incorporation or Organization:	corporation limited		please specify): PROCESSED
GENERAL INSTRUCTIONS CN for Canada; FN for other foreign jurisdiction) FIGURE 1. THE PROPERTY OF THE PROPERT	Jurisdiction of Incorporation or Organization: (Enter CN f	ation: O4 03 Actual Esti	mated JUL 15 2003

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 9

The second second		A. BASIC ID	ENTIF	ICATION DATA				
2. Enter the information t	equested for the fo	llowing:						
•		suer has been organized v		-				
								s of equity securities of the issuer.
		of corporate issuers and of	f corpo	rate general and mar	naging	partners of	partne	ership issuers; and
Each general and	managing partner o	of partnership issuers.						
Check Box(es) that Apply:	Promoter	Beneficial Owner	X	Executive Officer	×	Director		General and/or Managing Partner
Full Name (Last name first,								
HAGERTY Business or Residence Addr	HENRY ess (Number and	Street, City, State, Zip C	Code)					
218 WILLOW Check Box(es) that Apply:	BROOK L	ANE WEST C	HES	TER PA	93	82		
Check Box(es) that Apply:	Promoter	Beneficial Owner	X	Executive Officer	X	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)	-	195					
SHEAFFER Business or Residence Addr	HAROLD ess (Number and	Street, City, State, Zip C	ode)					
218 WILLOW	Brook LA	NE WEST CI	4 <i>6</i> 37	ER, PA 19	38	2		
Check Box(es) that Apply:	Promoter	Beneficial Owner	X	Executive Officer	X	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)		-	· · · · · · · · · · · · · · · · · · ·		7		
Souluer. Business or Residence Addr	FARID	0: 0: 7: 0						
				~ 0	10	264		
Check Box(es) that Apply:	□ Promoter	Beneficial Owner	LHO	Executive Officer	<u> </u>	Director		General and/or
One Box(es) that rippig.		senemenan samen	Ш	Date and Sincer		2	u	Managing Partner
Full Name (Last name first,	if individual)							
Business or Residence Addr	ess (Number and	Street, City, State, Zip C	ode)					
Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)							
Business or Residence Addr	ess (Number and	Street, City, State, Zip C	ode)					
Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)					*.		
Business or Residence Address	ess (Number and	Street, City, State, Zip C	ode)					
Check Box(es) that Apply:	Promoter	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)					-		
Ducingg on Besidence Adda	ogg (Number - 1	Street City Sees 7: C	ada)					
Business or Residence Addre	sss (inumber and	Street, City, State, Zip C	oue)					

					В. Г	NFORMAT	ION ABOU	T OFFERI	NG	a green	Market and Artist		8
1.								Yes	No 🔀				
••	Answer also in Appendix, Column 2, if filing under ULOE.							<u></u>	\\\\\				
2.	What is	the minim	um investm					_				\$ 25 ,	000
												Yes	No
3.			permit joint									X	
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.								he offering. with a state				
Full	l Name (I	ast name	first, if indi	vidual)									
Bus	siness or I	Residence	Address (Ni	ımber and	l Street, Ci	ty, State, Z	(ip Code)						
Nan	me of Ass	ociated Br	oker or Dea	ler									
Stat	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check '	'All States	" or check i	ndividual	States)		•••••	•••••	•••••	•••••	•••••	☐ All	States
	AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	LA NM UT	ME NY VT	MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Full	l Name (L	ast name i	first, if indi	vidual)		· · · · · · · · · · · · · · · · · · ·							
Bus	siness or	Residence	Address (N	umber an	d Street, C	ity, State, 2	Zip Code)				· · ·		
Nan	ne of Ass	ociated Br	oker or Dea	ler	*****								
Stat	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check '	'All States	" or check i	ndividual	States)							☐ All	States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Full	l Name (L	ast name f	first, if indiv	idual)									
Bus	iness or	Residence	Address (N	umber an	d Street, C	ity, State, 2	Zip Code)						
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)							☐ All	States					
	AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	OK	HI MS OR WY	ID MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt		
	Equity	\$ <u>515,100</u>	\$ 25,000
	▼ Common ☐ Preferred	•	•
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.	,	,
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		\$
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)	1	\$ 25,000
	Answer also in Appendix, Column 4, if filing under ULOE.		·
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total	-0-	\$0-
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs	·····×	\$ 1,000
	Legal Fees	······ X	\$ 2,000
	Accounting Fees	-	\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	.	s <u>41,208</u>
	Other Expenses (identify)		\$
	Total	X	. \$ 44,208

	C. OFFERING PRICE, NUMB	ER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Quantum proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross	3	s 470, 892
5.	Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for any check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part Co	purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross	İ	,
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		≥ \$ 139,000	\$
	Purchase of real estate		\$	
	Purchase, rental or leasing and installation of mach and equipment	inery	S	
	Construction or leasing of plant buildings and facil-	ities	\$	
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets issuer pursuant to a merger)	s or securities of another	□ \$	□ \$
	Repayment of indebtedness			_
	Working capital Other (specify):		 \$	
			\$	
	Column Totals		x \$ 139 000	X\$ 331,892
	Total Payments Listed (column totals added)		_	70,892
		D: FEDERAL SIGNATURE		
sig	issuer has duly caused this notice to be signed by the usature constitutes an undertaking by the issuer to furnitinformation furnished by the issuer to any non-accre	ndersigned duly authorized person. If this notic ish to the U.S. Securities and Exchange Commi	e is filed under Ru ssion, upon writte	lle 505, the following
	` '	Signature	Date 7/3/0	- -
	A MERICAN WIARLEST GANGE G, INC. ne of Signer (Print or Type)	Title of Signer (Print or Type)	1/3/0	<u> </u>

- ATTENTION -

HENRY G. HAGERTY